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I am here to support passage of HR 104, the resolution to memorialize the U.S. House of Representatives to pass HB 1646, the Federal Hearing Aid Assistance Tax Credit. Thank you for this opportunity to address an issue of great importance to me--and to many of your other constituents.

Thanks for captioning

I speak not only for myself, not only for the members of my organization, the Michigan affiliate of the Hearing Loss Association of America, but for more than 1 of every 10 Americans including 1.4 million Michigan citizens with hearing loss, their family, friends, and others who care and are impacted by the effects of this disability. People with hearing loss comprise the largest disability group in America and although the percentage increases as we age, includes people in all stages of life and from every segment of the population. The numbers are predicted to increase dramatically because of the growing number of senior citizens and returning veterans, the popularity of loud music, and the frequently unhealthy level of noise in our environment.

Ninety-five percent of people with hearing loss can be helped with hearing aids, but only 22% use them. Cost is a major factor accounting for the low percentage of use. (Statistics are from the MarkeTrak VIII survey of 2009). Hearing aids are not in the same price range as glasses. Glasses may cost a few hundred dollars at most; hearing aids cost thousands. The price for the two hearing aids most people require is often \$4000, and sometimes up to \$6,000 or even \$8,000 because of the particular devices needed. Hearing aids are for most people their third most expensive purchase; only their home and car cost more. Furthermore, this is not a one-time purchase. Audiologists recommend that hearing aids be replaced every 3 to 5 years. *I would love to replace the \$4000, 7-year old pair I have in my ears in order to take advantage of technological advances that would enable me to hear better, but I am daunted by the expense.*

There are a few fortunate individuals who have some coverage for hearing aids, but this is rare; most don't: 71.4% of people who buy aids pay the total amount out of pocket. Medicare does not cover hearing aids. Page 31 of the official booklet describing Medicare Benefits says, "**Note:** Medicare doesn't cover hearing aids and exams for fitting hearing aids." Medicaid does not cover hearing aids for adults and does not always approve them for children.

It is true that a tax credit for hearing aids does have cost implications, but so does untreated hearing loss—both for the individual and for society as a whole. For the

individual, there is loss of income earning capacity, educational disadvantage, social isolation, and often as a result of these, psychological depression. Children with appropriate hearing aids will be less likely to need expensive special education services and will acquire the language skills and other education to grow into productive citizens. People who would otherwise be dependent on government assistance can become tax-paying citizens. *The International Journal of Pediatric Otorhinolaryngology* reported that children who do not receive early intervention increase their cost to educate by \$420,000; that over their lifetime the cost of special education, lost wages and health complications is \$1,000,000. The Better Hearing Institute has said that the cost of untreated hearing loss is \$122 billion in lost earnings and 18 billion in lost federal taxes; I assume there is also lost revenue to our state. For the reasons discussed providing this tax credit should have a positive effect on government budgets.

Passage of HR 1646 would help correct a major inequality. Why should most people have help with the cost of their medical needs but not those of us with hearing loss? Why should we be singled out for exclusion so that we have to assume this large financial burden and many of us must do without a basic medical necessity? Why should people with hearing loss who are unable to afford the periodic outlay of thousands of dollars be denied this care and, as a consequence, often denied other benefits of our society?

HR 1646 is a modest beginning toward the remedy of this unfair situation. It would apply only to the purchase of hearing aids for children and for people over 55; it can only be used once every 5 years and there is an income cap of \$200,000. For children, correcting hearing loss is of vital importance. If a child's brain does not receive the sounds needed to develop language skills, the result is lifelong disability. Furthermore, children change frequently both physically and cognitively; hearing aids, to be effective, must be replaced often enough to keep up with these changes.

As for seniors, their income is often limited beyond any possibility of affording hearing aids on their own, Better Hearing Institute in 2007 reported that this results in added cost to Medicare and other health programs. One tragic result is an inappropriate diagnosis of dementia: older people with untreated hearing loss may not hear the questions given to test their cognitive functioning and therefore not respond appropriately; they may also have difficulty with the communication needed for effective social interaction in daily life, thus giving the false impression of cognitive impairment. The result can be unnecessarily institutionalization with large quality-of-life and financial cost. Much of this financial cost is borne by Medicaid.

For the above reasons, I strongly urge the passage of HR 104 in support of U.S. Congress HB 1646. HB 1646 has 118 co-sponsors including members of both political parties. A companion resolution has already passed in the Michigan Senate with bipartisan support.